

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF Freddie C. Batchelor		COURT CASE NUMBER 08C1658
DEFENDANT US Dept. of Housing & Urban Devel, et al.		TYPE OF PROCESS S/C
SERVE ➔ AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN U.S. Attorney Generals Office, Peter D. Keisler	
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) US Dept. of Justice, 950 Pennsylvania Ave., NW, Washington, DC 20530	

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

Freddie C. Batchelor
7943 S. Marquette, Apt. 2B
Chicago, IL 60617

Number of process to be served with this Form - 285	1
Number of parties to be served in this case	3
Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

FILED
Apr 24, 2008
APR 24 2008 PH

Fold

MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURT

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE

04-09-08**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 2 of 3	District of Origin No. 24	District to Serve No. 24	Signature of Authorized USMS Deputy or Clerk Td	Date 04-09-08
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I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Address (complete only if different than shown above)

*RECEIVED REPORT of Certified
 delivery (green card) Signed by E. P. Allen.*

Date of Service **04/24/08** Time **pm**

Signature of U.S. Marshal or Deputy

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
—	—	5.94	5.94	—	5.94	—

REMARKS: **Mailed certified mail 7007 0710 0000 9600 0863**

• Sender: Please print your name, address, and ZIP+4 in this box •

U.S. Department of Justice
United States Marshals Service
219 S. Dearborn St., Room 2444
Chicago, IL 60604
Attn: Civil Desk

08C1658

1B



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

**ATTORNEY GENERAL
U.S. DEPARTMENT OF JUSTICE
PENNSYLVANIA AVE. NW
WASHINGTON, DC 20530**

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Samuel P. Rubin

☐ Agent

☐ Addressee

B. Received by (Printed Name)

APR 14 2008

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

Article Number

(Transfer from service label)

7007 0710 0000 9600 0863

Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154